

SCHOOL-BASED SERVICE PROPOSED RULE CHANGES FREQUENTLY ASKED QUESTIONS

Question	Answer
<p>1. Why are changes being made to the school-based service rules?</p>	<p>In August 2008, a lawsuit was filed against the Department challenging certain Idaho Medicaid rules and related Medicaid communications regarding school-based services requirements. The focus of the challenge was on three sections of rules and a related Information Release that described Medicaid's interpretation of the rules.</p> <p>There were issues regarding the validity of Medicaid rule requirements and in May 2009, the judge ruled in favor of the plaintiffs.</p> <p>Medicaid is amending rules based on the court's decision and these amendments will be brought before the 2010 legislature for their approval.</p>
<p>2. What requirements in Medicaid's rules are being amended as a result of the ruling?</p>	<p>The following will be removed:</p> <ul style="list-style-type: none"> ▪ The requirement that Developmental Disability Agencies contract with schools before providing their agency services in a school. ▪ The requirement that Psychosocial Rehabilitation Agencies contract with schools before providing their agency services in a school. ▪ The requirement that only school-based service providers (public schools, charter schools, and the infant toddler program) may bill for Medicaid covered services provided in the schools.
<p>3. How is a decision made of who can deliver services in the school?</p>	<p>The judge was clear that the decision of who provides services in a school during the school day is the school's decision and not a Medicaid determination. Schools may choose to require contracts from community providers. The community provider must coordinate with the school. If the parent wants their child's provider to come into the school and provide services the parent and the school will need to work together to determine how best to meet the child's needs.</p>

Question	Answer
4. When can a community provider deliver services in the school?	The school governs its programs and its campus and is responsible for services related to educational benefits. The child's Individualized Education Plan (IEP) team determines what is included on the IEP and who will provide the services. If the service will enable the child to receive educational benefits, then it would be on the IEP and the school would bill. If the service is a Medicaid service not related to the child's educational program, then the community provider could bill.
5. How will this affect a participant's benefits?	If an agency provides services in a school, the agency will bill Medicaid directly as a community-based service benefit subject to existing community-based benefit requirements. For example, if the child receives developmental therapy at school from a community provider, the service will be included under the 22-hour weekly limitation.
6. Can a community provider deliver educational services in the school?	No, Medicaid is not able to pay for educational services.
7. What are additional amendments to the school-based service rules?	<p>While the school-based service rules are open for amendments, the Department is proposing to add the following:</p> <ol style="list-style-type: none"> 1. Align paraprofessional's rules with the appropriate licensure and certification rules to better clarify the paraprofessional's scope of work and supervision requirements for occupational therapy, physical therapy, speech-language pathology, and developmental therapy. 2. Align psychosocial rehabilitation (PSR) definitions and provider qualification requirements with the community PSR provider requirements in the Medicaid Enhanced Plan (16.03.10). 3. Align the collateral contact definition with the Medicaid Basic Plan (16.03.09) definition.
8. When will the proposed amendments be published?	The amendments will be published October 7, 2009, in the Idaho Administrative Bulletin and will be open for public comment from Oct. 7 – Oct. 28, 2009.